FREE

Live and Interactive CME Satellite Broadcast

Designed for physicians, pharmacists, nurses, and psychologists

Bipolar Depression: Short and Long Term Aims for a Frequently Missed Target

Objectives

At the end of this educational activity, participants should be able to:

- 1. Cite the prevalence of bipolar disorder and frequency of misdiagnosis
- Differentiate the symptoms of bipolar depression from unipolar depression
- 3. Examine the efficacies and risks of FDA-approved medications for bipolar disorder in the treatment of bipolar depression

Statement of Need

Bipolar depression is frequently under-recognized and frequently misdiagnosed as unipolar depression. Up to 60% of first episodes of bipolar disorder are depressive in nature. An 11-year prospective study indicated that 8.6% of unipolar depressed patients with no reported prior history of hypomania switched to bipolar II (developing hypomania).

Compared to unipolar depression, bipolar depression has a higher rate of morbidity and mortality. Bipolar depression is often characterized by more fatigue, psychomotor retardation, hypersomnolence, passivity, and a higher rate of suicide attempts. Bipolar disorder increases the likelihood of school truancy, occupational failure, and divorce. Accounting for 22-40% of all major depressive states, bipolar depression is more common in females.

Treating bipolar depression with antidepressants alone may induce treatment-resistance. In a National Institute of Mental Health study, 35% of patients with treatment-resistant bipolar disorder appeared to have developed their course in relation to chronic antidepressant use. Bipolar patients are generally recommended to maintain treatment with a mood stabilizer if placed on an antidepressant.

During this presentation, the efficacies and limitations of available mood stabilizers in treating bipolar depression will be examined. Available data concerning acute and maintenance treatment will be reviewed, examining the efficacies and risks in using these agents specifically for bipolar depression.

To Register: Fax this form to 814-466-7509 <u>OR</u>

Call 800-326-9166

(Circle time)			
Time of Activity:	12 noon	3 p.m.	
Email:		Number of Packets:	
Phone:		Fax:	
City:	State:	Zip:	
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Name:		Site ID:	
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March 9, 2004
Eastern: 12:00 noon
Central: 11:00 a.m.

Central: 11:00 a.m. Mountain: 10:00 a.m. Pacific: 9:00 a.m.

**This activity will rebroadcast at 3 p.m. Eastern time. Please adjust to your

time zone***

PRESENTED BY:

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pointingly education. This activity is approved to the contact hour (0.1 CEU's) in states that recognize ACPE. To receive credit you must attend the entire session and complete the evaluation form. The University of Florida College of Pharmacy will provide statements of Continuing Education Credit within 4 weeks after the session. 012-999-04-010-101



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